

PART B - FEE(S) TRANSMITTAL

d send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

e of corresponde (53). Ange of corresponde (53). Ange of corresponde (58). Ange of corresponde (58). BY (13). ANGE NAME A SE NOTE: Unlation as set fort AME OF ASSIGNAME OF ASSIGNAME (58). Collowing fee(s).	MEREDITH C ence address or indication condence address (or Cha B/122) attached. ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is identi- hin 37 CFR 3.11. Comp GNEE iate assignee category or are submitted: to small entity discount p of Copies tus (from status indicated as SMALL ENTITY status d Publication Fee (if requecords of the United Stat	Indication form and Use of a Customer A TO BE PRINTED ON ified below, no assignee election of this form is NO categories (will not be premitted) I above) Is. See 37 CFR 1.27. aired) will not be accepted the spatient and Trademark A TO BE PRINTED ON I above) I above) I above) I above) I above) I above) I above I	data will appear on the of a substitute for filing a (B) RESIDENCE: (CI) rinted on the patent): b. Payment of Fee(s): (Pl KFA check is enclosed Payment by credit of The Director is here overpayment, to De D. Applicant is no keld from anyone other than a Office.	to 3 registered pateratively, agle firm (having as a ragent) and the name tormeys or agents. If the printed of	a member a nes of up to no name is nee is identified COUNTRY) orporation or o ny previously is is attached. rge the required	d below, the do other private grow paid issue fee si d fee(s), any def (enclose an tatus. See 37 CF y or agent; or the	iciency, or credit any extra copy of this form).
PETRAVICK, e of corresponde 53). ange of correspond 53). ee Address" ind SB/47; Rev 03-0 eer is required. iNEE NAME A SE NOTE: Uni lation as set fort AME OF ASSIG eck the appropriate of the set of t	MEREDITH C ence address or indication condence address (or Cha 3/122) attached. ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is identified in 37 CFR 3.11. Comp GNEE iate assignee category or are submitted: lo small entity discount p f of Copies tus (from status indicated as SMALL ENTITY status	3671 n of "Fee Address" (37 inge of Correspondence " Indication form ied. Use of a Customer A TO BE PRINTED ON ified below, no assignee eletion of this form is NO categories (will not be put	056-012700 2. For printing on the (1) the names of up or agents OR, alterns (2) the name of a sin registered attorney of 2 registered attorney of 2 registered patent at listed, no name will of the patent of the thing at the control of the patent of the	to 3 registered pateratively, against his an assignment. If an assignment. If an assignment. If an assignment of a state	a member a nes of up to no name is nee is identified COUNTRY) orporation or o ny previously is is attached. rge the required	d below, the do ther private groupaid issue fee si d fee(s), any def	up entity Government hown above) ficiency, or credit any extra copy of this form).
PETRAVICK, e of corresponde 53). ange of correspond 53). ee Address" ind SB/47; Rev 03-0 eer is required. iNEE NAME A SE NOTE: Uni lation as set fort AME OF ASSIG eck the appropriate of the set of t	MEREDITH C ence address or indication condence address (or Cha 3/122) attached. ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is identified in 37 CFR 3.11. Comp GNEE iate assignee category or are submitted: lo small entity discount p f of Copies tus (from status indicated as SMALL ENTITY status	3671 n of "Fee Address" (37 inge of Correspondence " Indication form ied. Use of a Customer A TO BE PRINTED ON ified below, no assignee eletion of this form is NO categories (will not be put	056-012700 2. For printing on the (1) the names of up or agents OR, alterns (2) the name of a sin registered attorney of 2 registered attorney of 2 registered patent at listed, no name will of the patent of the thing at the control of the patent of the	to 3 registered pateratively, against his an assignment. If an assignment. If an assignment. If an assignment of a state	a member a nes of up to no name is nee is identified COUNTRY) orporation or o ny previously is is attached. rge the required	d below, the do ther private groupaid issue fee si d fee(s), any def	up entity Government hown above) ficiency, or credit any extra copy of this form).
PETRAVICK, e of corresponde 53). ange of correspond 53). ee Address" ind SB/47; Rev 03-0 eer is required. since NAME A SE NOTE: Unitation as set fort AME OF ASSIGneek the appropriate the appropriate to the set of the set	MEREDITH C ence address or indication condence address (or Cha 3/122) attached. ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is identify in 37 CFR 3.11. Comp SINEE interest assignee category or are submitted: fo small entity discount p for Copies tus (from status indicated	3671 n of "Fee Address" (37 inge of Correspondence " Indication form ied. Use of a Customer A TO BE PRINTED ON ified below, no assignee election of this form is NO categories (will not be properties) categories (will not be properties)	2. For printing on the (1) the names of up or agents OR, alterns (2) the name of a sir registered attorney of a registered attorney of a registered patent at listed, no name will! THE PATENT (print or the data will appear on the DT a substitute for filing at (B) RESIDENCE: (CT) Tinted on the patent): b. Payment of Fee(s): (PI) KMA check is enclosed Payment by credit of The Director is here overpayment, to De	to 3 registered pateratively, agle firm (having as a ragent) and the name torneys or agents. If the printed. Type) patent. If an assignment. Ty and STATE OR (Individual C lease first reapply on the control of t	at attorneys a member a nes of up to no name is nee is identified COUNTRY) orporation or o ny previously a is attached. rge the required	d below, the do ther private groupaid issue fee si d fee(s), any def	up entity Government hown above) ficiency, or credit any textra copy of this form).
PETRAVICK, e of correspond f3). ange of correspond f3). ee Address" ind SB/47; Rev 03-Coer is required. since NAME A SE NOTE: Uni lation as set fort AME OF ASSIG eck the appropri- collowing fee(s) in the Fee blication Fee (N	MEREDITH C ence address or indication condence address (or Cha B/122) attached. ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is identi h in 37 CFR 3.11. Comp GNEE inter assignee category or are submitted:	3671 n of "Fee Address" (37 inge of Correspondence " Indication form led. Use of a Customer A TO BE PRINTED ON ified below, no assignee election of this form is NO	056-012700 2. For printing on the (1) the names of up or agents OR, alterns (2) the name of a sir registered attorney of 2 registered attorney of 2 registered patent at listed, no name will listed, no name will of the patent	to 3 registered pateratively, agle firm (having as a ragent) and the name tormeys or agents. If the printed. Type) patent. If an assignment. Ty and STATE OR (Individual C lease first reapply on the content of t	a member a acs of up to no name is nee is identified COUNTRY) orporation or o ny previously is is attached. ree the require	2 3 d below, the do ther private grow	up entity Government hown above)
PETRAVICK, e of corresponde 53). aange of corresponde 53). aange of corresponde 530. aange of corre	MEREDITH C ence address or indication condence address (or Cha B/122) attached. ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is ident hin 37 CFR 3.11. Comp GNEE interest assignee category or are submitted:	3671 n of "Fee Address" (37 inge of Correspondence " Indication form led. Use of a Customer A TO BE PRINTED ON ified below, no assignee election of this form is NO	056-012700 2. For printing on the (1) the names of up or agents OR, alterns (2) the name of a sir registered attorney of 2 registered patent at listed, no name will of the thing of the t	to 3 registered pateratively, agle firm (having as a ragent) and the name torneys or agents. If the printed. Type) patent. If an assignment. Ty and STATE OR (Individual C clease first reapply of the state of	a member a nes of up to no name is nee is identified COUNTRY)	2 3 d below, the do	ocument has been filed for up entity Government
PETRAVICK, e of corresponde 53). aange of corresponde 53). aange of corresponde 58/47; Rev 03-0 eer is required. ENEE NAME A SE NOTE: Unlation as set fort AME OF ASSIG	MEREDITH C ence address or indication ondence address (or Cha B/122) attached. ication (or "Fee Address' 22 or more recent) attach ND RESIDENCE DATA less an assignee is identify in 37 CFR 3.11. Comp	3671 n of "Fee Address" (37 inge of Correspondence "Indication form led. Use of a Customer A TO BE PRINTED ON ified below, no assignee bletion of this form is NO	056-012700 2. For printing on the (1) the names of up or agents OR, alterns (2) the name of a sin registered attorney of 2 registered attorney of 2 registered patent at listed, no name will the PATENT (print or the data will appear on the T a substitute for filing a (B) RESIDENCE: (CI	to 3 registered pateratively, agle firm (having as a r agent) and the name ttorneys or agents. If be printed. type) patent. If an assignment. IY and STATE OR (a member a nes of up to no name is nee is identified	2 3d below, the do	ocument has been filed for
PETRAVICK, e of corresponde 53). aange of corresponde ss form PTO/SI ee Address" ind SB/47; Rev 03-C eer is required. NEE NAME A SE NOTE: Unilation as set fort	MEREDITH C ence address or indication ondence address (or Cha 8/122) attached. ication (or "Fee Address' 12 or more recent) attach ND RESIDENCE DATA less an assignee is identi h in 37 CFR 3.11. Comp	3671 n of "Fee Address" (37 nge of Correspondence "Indication form led. Use of a Customer A TO BE PRINTED ON	056-012700 2. For printing on the (1) the names of up or agents OR, alterns (2) the name of a sin registered attorney of 2 registered patent at listed, no name will 1 THE PATENT (print or the data will appear on the or a substitute for filing a	to 3 registered pateratively, agle firm (having as a r agent) and the name ttorneys or agents. If be printed. type) patent. If an assignment.	a member a nes of up to no name is	3	
PETRAVICK, e of correspond 53). aange of corresp sss form PTO/Si ee Address" ind SB/47; Rev 03-Coer is required.	MEREDITH C ence address or indication ondence address (or Cha 8/122) attached. ication (or "Fee Address' 12 or more recent) attach	3671 n of "Fee Address" (37 nge of Correspondence "Indication form led. Use of a Customer	056-012700 2. For printing on the (1) the names of up or agents OR, alterns (2) the name of a sir registered attorney or 2 registered patent at listed, no name will	to 3 registered pater atively, agle firm (having as a r agent) and the name ttorneys or agents. If the printed.	nt attorneys	2	
PETRAVICK, e of corresponde 53). hange of corresp ss form PTO/SI ee Address" ind SB/47: Rev 03-C	MEREDITH C ence address or indication condence address (or Cha 8/122) attached. 12 or more recent) attach	3671 n of "Fee Address" (37 nge of Correspondence	056-012700 2. For printing on the (1) the names of up or agents OR, alterns (2) the name of a sin registered attorney of 2 registered nament at	to 3 registered pater atively, agle firm (having as a r agent) and the nam	nt attorneys	2	
PETRAVICK,	MEREDITH C	3671	056-012700	e patent front page, li	ist		
							
EXAM	INER	ART UNIT	CLASS-STIRCT ASS	7			
-	- 	2.00	\$300	\$0		\$1000	12/18/2006
provisional	YES	\$700	\$300		TE FEE TOT.		DATE DUE
PIN TYPE	SMALL ENTITY	NO. E. P. P.	1				
OF INVENTION	: TRIMMER ATTACHI	MENT FOR LAWN MO			02307	9.0001	. 1073
09/825,176	04/03/2001				<u> </u>		CONFIRMATION NO.
LICATION NO			L	December			(Dote)
				Kallille	Great	<u></u>	(Signature)
721 LAKEFRONT COMMONS NEWPORT NEWS, VA 23606 3/2006 CCHRU2 00000073 09825176				addressed to the Mail Stop ISSUE FEE address transmitted to the USPTO (371) 273-2885, on the deeps the learning of the control			above, or being facsimile te indicated below. (Depositor's name)
		I S	Certificate of Malling or Transmission I hereby certify that this Fee(s) Transmittal is being exposited with the United States Postal Service with sufficient postage for first class mail in an envelope				
22467			papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
ENT CORRESPOND	DENCE ADDRESS (Note: Use B	F	'ee(s) Transmittal. Tl	his certificate c	annot be used fo	or any other accompanying	
d unless correct ance fee notific	ted below or directed of ations.	herwise in Block I, by	orders and notification of (a) specifying a new con	of maintenance fees rrespondence address	will be mailed s; and/or (b) in	to the current of dicating a separ	correspondence address as rate "FEE ADDRESS" for
JCTIONS: Thi	s form should be used	for transmitting the ISS	OF FAX (571)-273-2885 ATION FEE (if rem	uired). Blocks	I through 5 sh	ould be completed where
	ENT CORRESPOND 22467 LLIAMS IN JUNTAIN PI LAKEFRO WPORT NE HAU2 0000 LICATION NO. 199/825,176 F INVENTION LN. TYPE	22467 7590 09/11 LLIAMS MULLEN JNTAIN PLAZA THREE, SUI' LAKEFRONT COMMONS WPORT NEWS, VA 23606 HAU2 00000073 09825176 700.00 300.00 LICATION NO. FILING DATE 19/825,176 04/03/2001 F INVENTION: TRIMMER ATTACH	22467 7590 09/18/2006 LLIAMS MULLEN JNTAIN PLAZA THREE, SUITE 200 LAKEFRONT COMMONS WPORT NEWS, VA 23606 1802 00000073 09825176 700.00 0P 300.00 0P JICATION NO. FILING DATE 19/825,176 04/03/2001 F INVENTION: TRIMMER ATTACHMENT FOR LAWN MO	Or Fax (CTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATE. All further correspondence including the Patent, advance orders and notification of unless corrected below or directed otherwise in Block I, by (a) specifying a new counce fee notifications. INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of oddress)	Or Fax (571)-273-2885 CCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if require, All further correspondence including the Patent, advance orders and notification of maintenance fees to unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence addressince fee notifications. INT CORRESPONDENCE ADDRESS (Note: Use Block 1 for may change of address) Note: A certificate of Fee(s) Transmittal. The papers, Each addition have its own certification and its own certification for the control of the cont	Or Fax (571)-273-2885 CTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks ate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed at unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) in the fee notifications. PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of oddress) PAT CORRESPONDENCE ADD	CTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 state. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a sepa unce fee notifications. INT CORRESPONDENCE ADDRESS (Note: Use Block 1 for may change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block 1 for may change of oddress) INT CORRESPONDENCE ADDRESS (Note: Use Block 1 for may change of oddress) Note: A certificate of mailing can only be used for Fee(s) Transmittal. This certificate cannot be used for papers. Each additional paper, such as an assignment have its own certificate of mailing or Transmited to the USPTO of maintenance fees will be mailed to the cannot be used for papers. Each additional paper, such as an assignment have its own certificate of mailing or Transmission. Certificate of mailing or Transmission. Certificate of mailing or Transmission. I hereby certify that this Fee(s) Transmittal is being States Postal Service with sufficient postage for furst addressed to the Mail Stop ISSUE FEE address. The papers of the decrease of the Mail Stop ISSUE FEE address. The papers of the papers of the papers. Each additional paper, such as an assignment have its own certificate of mailing or transmission. States Postal Service with sufficient postage for furst addressed to the Mail Stop ISSUE FEE address. The papers of the decrease of the Mail Stop ISSUE FEE address. The papers of the decrease of the Mail Stop ISSUE FEE address. The papers of the decrease of the Mail Stop ISSUE FEE address. The papers of the decrease of the Mail Stop ISSUE FEE address. The papers of the papers of the papers. Each additional paper, such as an assignment have its own c

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE 1/21

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number 09/825,176

Filing Date April 3, 2001

				/					
	FORM	First Named Inventor James D. Mitchell, Jr.			. Mitchell, Jr.				
			Art Unit	3671					
			Examiner Name	Meredith	Meredith Petravick				
(to be used for all correspondence after initial filing)			Attorney Docket Number	-					
Total Number of Pages in This Submission 3			029079.0	0001					
	<u></u>	ENC	OSURES (Check al	l that app	(v)				
			(0.000.00.00.00.00.00.00.00.00.00.00.00.	, пластарр	After Allowance Communication to TC				
Fee Tran	smittal Form		Drawing(s)						
F	ee Attached		Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences				
Amendme	ent/Reply		Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
			Petition to Convert to a Provisional Application		Proprietary Information				
After Final Affidavits/declaration(s)			Power of Attorney, Revocation						
			Change of Correspondence	Address	Status Letter Other Enclosure(s) (please Identify				
Extension	Extension of Time Request		Terminal Disclaimer		below):				
Express Abandonment Request		[L] F	Request for Refund		Part B- Issue Fee Transmittal Postcard Return Receipt				
Information Disclosure Statement		CD, Number of CD(s)			Letter				
Information bisclosure Statement		Landscape Table on CD			\$1,000 Check				
Certified	Copy of Priority	Remar		-					
Documer									
	Missing Parts/								
Incomplete Application Reply to Missing Parts									
under 37 CFR 1.52 or 1.53									
		:							
	SIGNA	TURE C	F APPLICANT, ATTO	RNEY,	OR AGENT				
Firm Name	Williams Mullen, PC			-					
Signature	Thomas f.	ley.	4						
Printed name	Thomas F. Bergert, Esq.	()							
Date	December 11, 2006		Reg. No.	38,076					
			- um						
	С	ERTIFIC	ATE OF TRANSMISS	ION/MA	ILING				
I hereby certify th	at this correspondence is b	eing facsi	mile transmitted to the USP1	O or depo	sited with the United States Postal Service with				
sufficient postage		velope add	dressed to: Commissioner fo	r Patents,	P.O. Box 1450, Alexandria, VA 22313-1450 on				
the date shown b	CIUW.								

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date

December 11, 2006

Signature

Typed or printed name

Rachelle Gruenberg

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of

James D. Mitchell, Jr. Attorney Docket No. 029079.0001

Serial No.: 09/825,176 Examiner: Meredith C. Petravick

Filed: April 3, 2001] Art Unit: 3671

For: Trimmer Attachment For Lawn Mowers and Tractors

Mail Stop: Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL OF PAYMENT OF ISSUE FEE

The following are enclosed herewith:

- (1) Part B Fee Transmittal;
- (2) A check in the amount of \$1000.00 in payment of the fees;
- (3) Transmittal form.

Please charge any additional fee(s) or credit overpayments of fee(s) under 37 CFR 1.16 and 1.17 to Deposit Account 50-0766.

Respectfully submitted,

THOMAS F. BERGERT Attorney for Applicant

Reg. No. 38,076

Enclosure

Filed: December 11, 2006

1367397v